

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type:: Utility

Subject Matter::

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD disks::

Number of copies of CDs::

Sequence submission?:: YES

Computer Readable Form (CRF)?:: YES

Number of copies of CRF:: 1

Title:: Amelioration of Effects of Cigarette Smoke

Attorney Docket Number:: 003413.00008

Request for Early Publication?:: NO

Request for Non-Publication?:: NO

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?:: YES

Latin name::

Variety denomination name::

Petition included?:: NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: NO

## **Applicant Information**

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States of America
Status::	Full Capacity
Given Name::	Mark
Middle Name::	L.
Family Name::	Witten
Name Suffix::	
City of Residence::	Tucson
State or Province of Residence::	Arizona
Country of Residence::	United States
Street of mailing address::	7032 E. Rosewood Street
City of mailing address::	Tucson
State or Province of mailing address::	Arizona
Country of mailing address::	United States
Postal or Zip Code of mailing address::	85710

Applicant Authority Type::	Inventor
Primary Citizenship Country::	United States of America
Status::	Full Capacity
Given Name::	David
Middle Name::	T.
Family Name::	Harris
Name Suffix::	
City of Residence::	Tucson
State or Province of Residence::	Arizona
Country of Residence::	United States
Street of mailing address::	4100 Alvernon Way

City of mailing address:: Tucson  
State or Province of mailing address:: Arizona  
Country of mailing address:: United States  
Postal or Zip Code of mailing address:: 85718

### **Correspondence Information**

Correspondence Customer Number:: 22907

### **Representative Information**

Representative Customer Number:: 22907

### **Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	Non-provisional of	60/406,036	08/27/02

### **Foreign Priority Information**

Country::	Application number::	Filing Date::	Priority Claimed::

### **Assignee Information**

Assignee name::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::